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### COVER LETTER

Division of Corporations DELTA CAPITAL ENTERPRISES INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ATUL KUMAR
Name of Contact Person DELTA CAPITAL ENTERPRISES INC Firm/Company
7241 BRANCHTREE DR Address

RLANDO FL-32835

City/ State and Zip Code est (to be used for future annual report notification) For further information concerning this matter, please call: ATUL KUMAR at (407) 601-931)

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee **2** \$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

## ✓ Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

#### Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# Articles of Amendment to Articles of Incorporation of

DELTA CAPITAL	ENTERPRISES, INC
(Name of Corporation as currently f	filed with the Florida Dept. of State)
(Document Number of C	<del></del>
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A P. 3. I.
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent  7241 RRANG	KUMAR  HTREE DR
(Florida street New Registered Office Address: ORLAN	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent.	h and accept the obligations of the position.  State of the position.  State of the position.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President: V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X_ Change	L.	ATUL KUMAR	7241 BRANCHTREE DR
Add			7241 BRANCHTREE DR ORLANDO FL-3283S
Remove			
2) Change		NIA	<u> </u>
Add			
Remove 3 ) Change		NIA	
Add			
Remove			
4) Change		NIA	
Add			<u> </u>
Remove		1	
5) Change		$\mathcal{N}/\mathcal{A}$	
Add		·	<del>-</del>
Remove		NIA	
6) Change			-
Add			
Remove			

ttach additional sheets, if nec	ional Articles, enter change(s) here: cessury). (Be specific)	
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an amendment provides fo	or an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing	g the amendment if not contained in the amendment itself:	
(if not applicable, indicat	te N/A)	
·	<del></del>	
	- I A	
	NA -	
·		

The date of each a date this document	was signed.  olimination: 01-01-2018 if other than it was signed.
Effective date if a	pplicable:
<u> </u>	(no more than 90 days after amendment file date)
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as we date on the Department of State's records.
Adoption of Ame	ndment(s) ( <u>CHECK ONE</u> )
The amendmen action was not i	t(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder required.
	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.
	t(s) was/were approved by the shareholders through voting groups. The following statement stely provided for each voting group entitled to vote separately on the amendment(s):
"The num	ther of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
ļ	Dated 09-05-2021
1	Signature Signature
·	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)